

ISSUE SLIP STAPLE AREA (*for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		✓	02/12/10
FORMALITY REVIEW	✓	927	02/12/10
RESPONSE FORMALITY REVIEW	✓	919	5-10-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓✓
16	N N
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
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29	✓
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31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	N N
48	✓
49	✓
50	✓

Claim	Date
Final	Original
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
59	✓
60	✓
61	✓
62	✓
63	✓
64	✓
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66	✓
67	✓
68	✓
69	✓
70	✓
71	✓
72	✓
73	✓
74	✓✓
75	✓✓
76	N
77	✓
78	✓
79	✓
80	✓
81	✓
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100	✓

Claim	Date
Final	Original
101	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

618
02/12/10